

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 24, 2002 8:00 am**  
**Secretary of State**  
 03-24-2002 90060 019 \*\*\*150.00

**DOCUMENT # P01000080018**

1. Entity Name

**ROBERT W. SULLIVAN CONSTRUCTION CO., INC.**

Principal Place of Business

**THEODORE M BURT, ESQ.**  
**114 NE 1ST ST, P O BOX 308**  
**TRENTON FL 32693**

Mailing Address

**THEODORE M BURT, ESQ.**  
**114 NE 1ST ST, P O BOX 308**  
**TRENTON FL 32693**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**01-3611502**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BURT, THEODORE M**  
**THEODORE M BURT, ESQ.**  
**114 NE 1ST ST, P O BOX 308**  
**TRENTON FL 32693**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SULLIVAN, ROBERT W SR</b> <b>5290 SE 55TH AVE</b> <b>TRENTON FL 32693</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SULLIVAN, ROBERT W JR</b> <b>5290 SE 55TH AVE</b> <b>TRENTON FL 32693</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SULLIVAN, ELLEN M</b> <b>5290 SE 55TH AVE</b> <b>TRENTON FL 32693</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-4-02**

Date

**357-463-8400**

Daytime Phone #

CR2E034 (9/01)

Attachment  
# P01000080018

BURT & FEATHER  
Attorneys at Law  
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Post Office Box 308  
Trenton, Florida 32693

342474

Theodore M. Burt  
Mark J. Feather  
Patti Lee Meeks

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fax (352) 463-6908

March 7, 2002

Division of Corporations  
Uniform Business Report Filings  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

Re: Robert W. Sullivan Construction Co., Inc.  
FEI #04-3611502

Gentlemen:

Enclosed please find the 2002 Uniform Business Report regarding the referenced corporation, together with a check in the amount of \$150.00 to cover the filing fee.

Yours truly,

*Susan Thorsen*

Susan Thorsen  
Legal Assistant

/st

Enclosures: Report  
Check

9263.doc